

# Building Blocks: Africa-wide briefing notes

## Overview



Resources for communities  
working with orphans and  
vulnerable children

# Acknowledgements

## What is the International HIV/AIDS Alliance?

The International HIV/AIDS Alliance (the Alliance) is an international non-governmental organisation that supports communities in developing countries to make a significant contribution to HIV prevention, AIDS care and to the provision of support to children affected by the epidemic. Since its establishment in 1993, the Alliance has provided financial and technical support to NGOs and CBOs from more than 40 countries.

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# Background



These briefing notes are part of a set of six, comprising five topics and this overview:

- Education
- Health and nutrition
- Psychosocial support
- Social inclusion
- Economic strengthening

All these areas are important and should be considered together in an integrated response.

Each briefing note provides issues and principles for guiding strategy, while drawing on best practice from programme experience. Each can be used alongside a Participatory Adaptation Guide, which will help organisations and community members, including children, to adapt these principles and strategies to their own local situation.

These briefing notes have been developed through a highly participatory process, guided by an international advisory board. During their development in English, French and Portuguese, they have been reviewed by more than 80 people across Africa. These people have read and commented on the papers, and have added examples and case studies from their own countries. One part of the review took place at a meeting in Uganda, attended by 20 people from Uganda, Malawi, Zambia, Zimbabwe, Kenya, Burkina Faso, Senegal, Mali, Mozambique and Angola. The people who attended this meeting then took the papers back to their colleagues in their home countries, who undertook a further process of review. Examples and case studies from this process have been noted in the text as coming from a "Member of the Building Blocks Development Group".

These briefing notes are divided into four sections:

## INTRODUCTION

An overview that explains why programmes need to strengthen the skills and resources of families and communities to cope with the impacts of HIV/AIDS.

## ISSUES

An outline of the impact of HIV/AIDS on children.

## PRINCIPLES

Guidelines for programmes aimed at strengthening the coping capacity of vulnerable children, families and communities.

## STRATEGIES

Possible ways of taking action to strengthen support for orphans and vulnerable children.

# Introduction

There is a growing evidence base for strategies that are effective in supporting orphans and vulnerable children. As the evidence base is not yet comprehensive, strategies in the briefing notes include both those that have been implemented together with suggestions for strategies based on the experience of people working with orphans and vulnerable children. As such, strategies are not given in any order of priority or relative effectiveness.

The HIV/AIDS epidemic has vastly increased the number of orphans and other vulnerable children, particularly in Africa. Most programmes aim to meet the basic material requirements of these children. But children need – and are entitled to – a wide range of other forms of support. Without this, the future for these children, their families and the communities in which they live lies in jeopardy. These briefing notes are intended to help governments, non-governmental and religious organisations meet the severity of this challenge and provide more effective, holistic support to children within their families and communities.

The overview outlines important issues involved in working with orphans and other children made vulnerable by HIV/AIDS, and summarises principles for programming support for them.

# Issues

## WHAT IS THE EXTENT OF THE PROBLEM?

An orphan is any child who has lost either one or both parents. In 2001, Children on the Brink estimated that there were 34.3 million<sup>1</sup> orphans (maternal, double and paternal) from all causes in sub-Saharan Africa. Almost one in eight of all the children in Africa are orphans.

However, other children, as well as orphans, lack support and are vulnerable. These include street children, children affected by conflict, children with disabilities, children affected by HIV/AIDS and female children. Most of the children in the world who are living with HIV are in sub-Saharan Africa. Millions are living with parents who are sick, and many more are living in households that are struggling to provide care for one or more orphans. These briefing notes focus on children affected by AIDS, although most of the principles and strategies apply to all vulnerable children.

The large number of people already living with HIV and the potential time-lag of around 10 years between infection with HIV and death due to AIDS means that illness and death will continue for many more years. The number of orphans and vulnerable children is likely therefore to remain high for some time.

## WHAT IS THE EFFECT OF HIV/AIDS ON CHILDREN?

The HIV/AIDS epidemic threatens children's basic human rights, including their rights to survival, health, development, education, rest and leisure, and protection from abuse and neglect, sexual and economic exploitation. Compared to other children, orphans and vulnerable children are more likely to:

- do badly in school and/or drop out of school
- have poor educational and vocational opportunities
- begin working early
- have poor health and nutrition
- lose their rights to land and property
- lack love, care and attention
- experience stigma and discrimination
- experience exploitation and abuse
- suffer sexual abuse, including child prostitution and trafficking
- become HIV infected
- lack emotional support to deal with grief and trauma
- experience long-term psychological problems
- take drugs and other substances
- become involved in crime.

<sup>1</sup>These figures refer to children up to the age of 15 years.

# Issues

These risks are often greatest for children from the poorest families and communities. The extent to which children become affected depends on many things, including:

- their age and sex
- which parent they have lost
- the age of their guardian/care-giver
- the number of adults and children in their new home
- the income and economic status of their new family
- their access to health, education and social services
- the extent to which these services are still able to cope
- their access to and the existence of government safety nets, such as social welfare
- the amount of stigma and discrimination that they experience
- the extent to which they are included in family and community life.

Although children have many needs in common, these needs do vary according to their age and gender, and this should be taken into account.

## CHANGING FAMILY STRUCTURES IN ZIMBABWE

Traditionally, the family elders would meet and assign a relative – usually the father's oldest brother – to care for an orphaned child. But the ability in terms of skills and resources (capacity) of families to do this is becoming strained. A study of 300 orphan households in Zimbabwe in 1995 found that half of all caregivers were grandparents, and 3 per cent of households were headed by children, some as young as 11 years of age. Children cared for by elderly grandparents face orphaning for a second time when their grandparents die.

*Foster G., Makufa C., Drew R., Kambeu S. and Saurombe K. (1996)*



## HOW ARE FAMILIES AND COMMUNITIES RESPONDING?

Traditionally in Africa, orphans have always been absorbed within the extended family structure. But now extended families are struggling to cope. This is because of the overwhelming number of deaths due to HIV/AIDS, economic changes which have led active young people to leave, and the fact that many middle-aged people have died, leaving the old and the young to care for children.

Many households caring for orphans and vulnerable children, including child-headed households, receive little or no support from their families, communities or the state, largely because resources are so limited. Community support is usually confined to one-off donations or handouts rather than routine, long-term care and support. Households that are already marginalised and urban households without extended family networks often receive the least support.



*Now the extended family is often unable to cope*



# Issues

## WHY ARE ORPHANS AND VULNERABLE CHILDREN MORE LIKELY TO BE EXPOSED TO HIV?

Orphans and socially excluded children – particularly girls – can be more vulnerable to HIV infection for the following reasons:

- Children living in difficult economic circumstances may be forced into risky sexual behaviour to survive. Girls who are supporting themselves and younger siblings may feel pressurised to exchange sex for economic support.
- Children may be sent away from home to work, where they may be exposed to sexual abuse by their employers or sexual exploitation through sex work.
- Children who lack parental guidance and support and who are emotionally vulnerable may get involved in risky sexual relationships to try to meet their emotional needs.
- Children who live on their own or on the streets are often sexually active at younger ages than other children, and are also more exposed to rape and sexual exploitation.
- Children who use drugs and alcohol are more likely to engage in risky sex.<sup>2</sup>
- Children who are socially excluded often lack information about sexually-transmitted infections, including HIV/AIDS, and how to protect themselves. They also lack access to condoms and health services.
- Children who do not go to school are less likely to have the knowledge and skills to protect themselves from HIV infection and will have fewer employment opportunities.
- Children and younger adolescents are less likely to use condoms or to be able to negotiate condom use.<sup>3</sup>

A study by Save the Children UK noted that in Uganda some 10 year-olds were sexually active and that adolescent girls exchanged sexual favours for economic and material support from older men.

*Member of Building Blocks Development Group*

<sup>2</sup> Smart, R. (2001) *Children Living with HIV/AIDS in South Africa: A Rapid Appraisal*, Save the Children UK.

<sup>3</sup> Ibid.



# Principles

In planning programmes to support families and communities, it is important to understand the particular problems of affected children, families and communities, what resources are available to them and how they are already coping with these problems. However, addressing the specific needs of a community can be guided by some general principles. The principles outlined below are based on the strategic framework approved by the UNAIDS Committee of Cosponsoring Organisations (Hunter and Williamson, 1997):

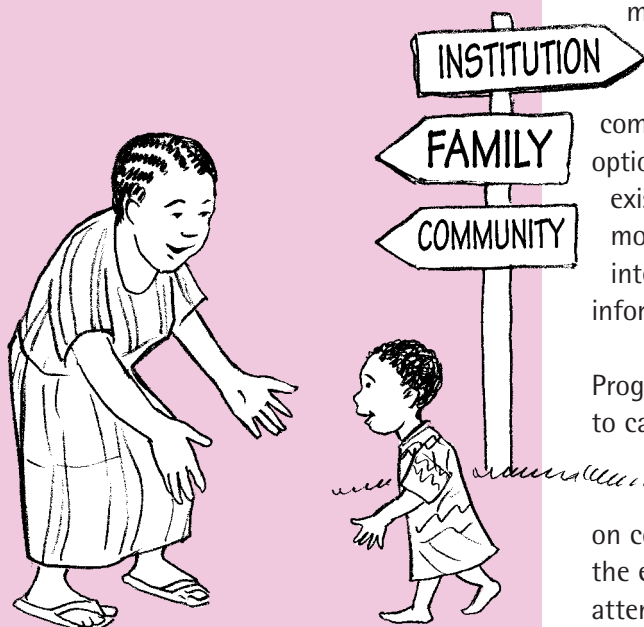
1. Strengthen the capacity of families to cope with their problems
2. Stimulate and strengthen community-based responses
3. Work with communities to define needs and identify vulnerable children and households
4. Ensure that external support does not undermine community initiative and motivation
5. Ensure that governments protect the most vulnerable children and provide essential services.

1

## STRENGTHEN THE CAPACITY OF FAMILIES TO COPE WITH THEIR PROBLEMS

When a household begins to experience the effects of HIV, extended family relationships are its first safety net, providing additional resources and support. Most children who lose their parents live with members of their extended family. They grow and develop better in a family-based environment than in an institutional setting. Institutions are more costly to support than families and communities. They should only be used when there is no other option, and even then only as a short-term solution. Better options exist within the community and should be encouraged; for example, monitored fostering, local adoption and small group homes integrated into the children's own communities. There is more information about this in the briefing note on psychosocial support.

Programmes should aim to increase the capacity of families to care for orphans and vulnerable children. This includes strengthening community safety nets, such as material and emotional support provided by neighbours; focusing welfare on communities and families rather than individuals; and supporting the economic capacity of families and communities. Particular attention should be paid to strengthening family and community capacity to meet the psychosocial needs of orphans and vulnerable children in order to prevent future psychological, emotional, behavioural and social problems.



*Children develop better in a family than an institution*

# Principles

The Community-based Options for Protection and Empowerment (COPE) programme in Malawi is supporting communities to organise themselves and care for orphans by building on existing community efforts. COPE staff are viewed in communities as part of the district- and/or community-level committees and not as officials from a non-governmental organisation (NGO). The role of the health catchment area and district committees is to enable villages to get external support. They have linked village committees to agricultural extension agents, who provide advice for the communal gardens that produce food for vulnerable families and revenue to finance committee activities.

COPE has helped communities set up village orphan committees. They identified the following characteristics and skills of effective community mobilisers:

- leadership
- an understanding of why communities resist change and how to overcome resistance
- a sense of humour
- the ability to act as role models
- respect for the community and its culture
- commitment to letting communities take the lead
- patience, commitment, confidentiality and facilitation skills.

*Member of Building Blocks Development Group*

2

## STIMULATE AND STRENGTHEN COMMUNITY-BASED RESPONSES

Policies and programmes should focus on mobilising and empowering communities to take responsibility for orphans and vulnerable children. External organisations can help to strengthen the skills of community committees and associations. Communities should not only identify which children and households are most vulnerable but also the most appropriate ways to support them.

Steps in mobilisation include:

- Recognition on the part of community members that they are already dealing with the impacts of HIV/AIDS and that they can be more effective if they work together ('we need to support each other to deal with this').
- The sense of responsibility and ownership that comes with this recognition is the starting point for identifying what responses are possible ('this is happening to us so it's up to us to do something about it').
- Identification of community resources and knowledge, individual skills and talents ('who can, or is already doing what; what resources do we have; what else can we do').
- Identification of priority needs ('what we're really concerned about is').
- Community members, including children, planning and managing activities using their own resources.
- Increasing the capacity of community members to continue their chosen activities, to be able to get external support when internal means are exhausted, and to sustain their efforts over the long term.

This process does not happen all at once or necessarily in this order. External organisations act as catalysts to achieve this ownership using participatory processes. They are facilitators, not managers; capacity builders not direct service deliverers.

The government in Malawi is also supporting the establishment of community centres to improve care and early learning opportunities for children. These childcare centres, which are for all preschool children not just orphans, provide a place for children to learn, play, socialise and eat. They also care for children when grandparents or parents are unable to do so. The centres are run by community volunteers who have had some training and receive some reimbursement from the community. Healthcare outreach workers also come to the centres to immunise the children and monitor their growth.

*Member of Building Blocks Development Group*

# Principles

The Chikankata Community Health and Development Team in Zambia has established local children in need committees, including teachers, community health workers and village leaders who are trained in community and family education, counselling and advocacy for abused children.

Committee members register orphans and vulnerable children and visit them regularly at home to assess their problems and needs.

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In Zimbabwe, the Families, Orphans and Children Under Stress (FOCUS) programme has around 140 women volunteers, many of them widows looking after orphans. The volunteers are given basic training to identify and register orphans in the community, to recognise those in need of help, make regular visits and provide material and practical support to enable children to remain in their homes and communities. The volunteers have developed their own criteria for identifying the most needy children: for example, children in homes with no food or signs of recent cooking; those living in huts in a poor state of repair; those who are dirty or in rags; and those who are withdrawn. Some communities have set up child welfare forums that involve community leaders. This ensures that the community understands why certain households have been chosen for support and enables volunteers to influence community decision-making. It has also improved support for affected children and families.

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3

## WORK WITH COMMUNITIES TO DEFINE NEEDS AND IDENTIFY VULNERABLE CHILDREN AND HOUSEHOLDS

Programmes should strengthen the capacity of communities, families and children to assess their own needs and build on their own ways of coping in order to provide community-based care and protection for children. Participation can increase local awareness of an issue in question and encourage more community members to become involved in the response.

Often, the most vulnerable children and families are the least likely to make their needs known to the community. Community-based programmes must make an active effort to identify them and to mobilise local resources to respond to their most urgent needs.

In Uganda, Save the Children UK trained community-based volunteers in a peri-urban project to identify households affected by HIV/AIDS, promote the rights of children and provide counselling to children and caregivers.

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4

## ENSURE THAT EXTERNAL SUPPORT DOES NOT UNDERMINE COMMUNITY INITIATIVE AND MOTIVATION

Programmes should reinforce existing efforts by communities and families to care for orphans and vulnerable children rather than set up new initiatives that could undermine these efforts. This means working through organisations such as churches, schools and women's groups, and building on community structures that have been mobilised to deal with problems such as water and sanitation, health and economic development.

Programming should avoid creating dependency on external support, although this must be balanced with the needs of communities where people have few resources. External organisations can provide communities with direct support or strengthen the capacity of intermediary organisations to support community initiatives. Ideally, communities need direct access to resources. If this is not feasible, intermediary organisations need to develop transparent mechanisms to ensure that resources are used effectively and equitably.

# Principles

## LESSONS LEARNED FROM EVALUATION OF THE FOCUS PROGRAMME IN ZIMBABWE

- Community ownership is vital and should involve the wider community and all those who are to benefit from the programme (stakeholders).
- Develop programmes based on the needs and resources of the community, and strategies that build on existing practice and culture; for example, home visits.
- Use available entry points into the community; for example, existing links with religious institutions.
- Use and select credible community volunteers. For example, women who are church members may be more reliable and less likely to demand inappropriate financial or material rewards. However, providing volunteers with support, recognition and other incentives, such as outings, is important.
- Avoid raising expectations about material and financial support, or providing inputs that cannot be sustained.
- Community mobilisation is possible, although more difficult, in urban areas.
- Plan programming according to the seasonal demands of agriculture.
- Avoid too many visits by international organisations, as this can create community suspicions that substantial resources have been made available but are being skimmed off by NGOs, supervisors or volunteers.
- Take care to maintain a balance between following community norms and challenging practices such as sexual abuse or lack of children's participation.

Lee, T. (1999)

5

## ENSURE THAT GOVERNMENTS PROTECT THE MOST VULNERABLE CHILDREN AND PROVIDE ESSENTIAL SERVICES

Policies and programmes should target communities where the epidemic has left the largest numbers of orphans, vulnerable children and affected families. Within these communities, assistance should target the most vulnerable children and households, regardless of the cause of their vulnerability.

Focusing on orphans alone excludes other children whose lives have also been affected by HIV; for example, those living with terminally ill parents or in families impoverished by HIV. Singling out 'AIDS orphans' for special attention can increase their isolation and stigma, causing resentment within communities and foster families. Programmes that provide support to all orphans and vulnerable children rather than just to 'AIDS orphans' can help to challenge stigma and discrimination.



*Both children need help*

# Strategies

## DEVELOPING COMMUNITY SUPPORT FOR ORPHANS AND VULNERABLE CHILDREN IN ZIMBABWE

In Zimbabwe, some organisations have adopted a phased approach to supporting orphans and vulnerable children:

1. **Assess the situation** Identify the number of orphans and other children in need of special care and protection; identify who is looking after them and how they are living. Area and village committees are trained to do this by the Child Welfare Forum.
2. **Increase community awareness of the needs of orphans and vulnerable children** Communities are encouraged to discuss the children's problems, share experiences and identify possible solutions. Meetings are organised with local chiefs and headmen, church and political leaders.
3. **Strengthen communities through communal projects and activities** Volunteers organise practical initiatives to ensure that children are fed, housed and clothed, and help them with chores.

*Member of Building Blocks Development Group*



*Create an enabling environment for children's rights*

This section outlines eight potential strategies for action:

1. Build the capacity of children to support themselves
2. Create a supportive environment for affected children and families
3. Pay particular attention to women and girls
4. Encourage links between HIV/AIDS prevention and care activities, and support for orphans and vulnerable children
5. Develop a multi-sectoral response involving partnerships at all levels
6. Monitor the impact of HIV/AIDS on children and families
7. Reduce vulnerability to HIV infection
8. Meet educational, psychological and emotional, and economic needs

1

### BUILD THE CAPACITY OF CHILDREN TO SUPPORT THEMSELVES

Programmes should strengthen the capacity of children to express and meet their own needs. Children have the potential. They should be given the opportunity to participate in all decisions and activities related to things that concern them. They should be involved in identifying, prioritising and addressing questions that affect their lives. This means listening to children and enabling them to make decisions about their futures. Children's rights to confidentiality and freedom from discrimination should not be compromised by their participation in programme design, implementation, monitoring and evaluation. They should be able to participate in an environment where they feel secure.

Programmes could also consider other ways to involve children, such as in community committees, home-care training and as educators or providers of peer support for younger children.



# Strategies

Kuleana, a centre for children's rights in Mwanza, Tanzania, has developed policies and programmes with the full participation of children and conducted research where children are the primary respondents. Kuleana also produces a child rights magazine written by children.

*Kuleana Centre for Children's Rights, PO Box 27, Mwanza, Tanzania, Advocacy Centre*

In Uganda, Save the Children UK has piloted a child-led project, in which children identified and ranked the issues that endanger their wellbeing. They identified child abuse as an overriding concern. These children have formed committees at village level, linked to the local council and probation office, which investigate and deal with child abuse cases. Hidden cases of child abuse have since been reported and justice administered.

*Member of Building Blocks Development Group*

In Uganda children may have low status in society and the issue of child rights may be unwelcome in many communities. However, a successful approach to promoting awareness of child rights has been to discuss the issue patiently with the local leaders and then, with their help, the larger community.

*Member of Building Blocks Development Group*

*Communities should take responsibility for orphans and vulnerable children*

2

## CREATE A SUPPORTIVE ENVIRONMENT FOR AFFECTED CHILDREN AND FAMILIES

The Convention on the Rights of the Child, from which the African Charter on the Rights and Welfare of the Child is derived, can be used as the basis for creating a supportive environment. It provides a framework that puts the wellbeing and best interests of the child first, ensures that all children are treated equally, identifies the importance of families, communities and culture, and emphasises children's rights to life, survival, protection, development and participation in decision-making. This framework can be used to inform policy-making, to advocate for policies and to monitor policy and laws.

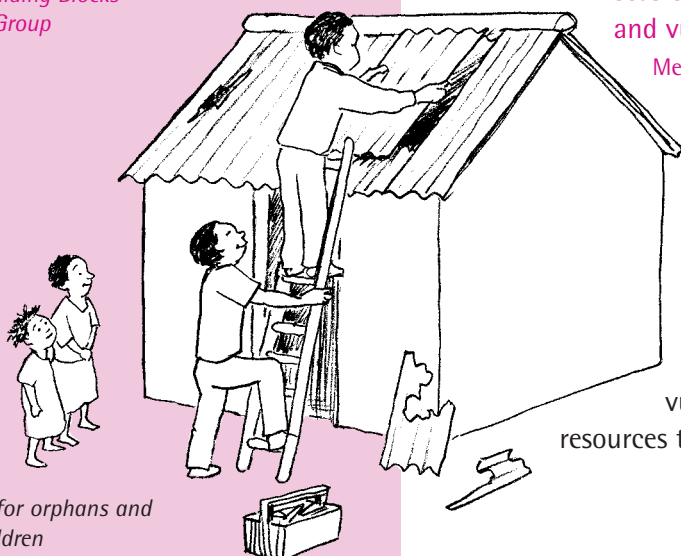
Customs that violate children's rights will only change with the support and co-operation of community and traditional leaders. Protecting the rights of children therefore means involving communities in defining rights, building consensus, identifying rights that are violated, deciding what action needs to be taken and who should be responsible for changing the situation or enforcing existing laws and policies. Protecting the rights of children also means ensuring that children and those who care for them are aware of their rights and able to exercise them.

Building a supportive environment requires efforts to increase awareness and commitment among policymakers and the wider public to establish laws and policies to protect orphans and vulnerable children and to reduce the stigma and discrimination associated with HIV/AIDS.

Although Uganda's Children's Statute and Local Government Act of 1997, which provide for the rights and best interests of children, are a considerable achievement, it is felt that their implementation needs to be strengthened and scaled up so that orphans and vulnerable children can achieve their full rights.

*Member of Building Blocks Development Group*

Political will and leadership are essential to meet the needs of orphans and vulnerable children and of children in general. For example, government commitment to and investment in basic services, such as primary education, nutrition, primary healthcare, low-cost water and sanitation, will benefit orphans and vulnerable children more than allocation of resources to hospital services or secondary education.



# Strategies

In Uganda there has been strong political support for HIV/AIDS management at the highest level. Free universal primary education is just one example of the efforts made to provide educational support for vulnerable children.

*Member of Building Blocks Development Group*

Malawi established the National Orphan Care Task Force, established in 1991. This task force, which includes representatives from government, NGOs, international agencies such as UNICEF, and religious organisations, was responsible for developing a national orphan care policy and recommending changes to the Wills and Inheritance Act, Adoption Act and Children and Young Person's Act to protect the rights of orphans. The government has also taken steps to protect women's rights to property regardless of marital status and to retain guardianship of children after the death of their father.

*Member of Building Blocks Development Group*

In Uganda the Federation of Women Lawyers (FIDA) has played a vital role in protecting the property rights of AIDS orphans and widows. There is also a network to promote the rights of children and seek redress for children who have experienced torture and abuse.

*Member of Building Blocks Development Group*

Families and communities do not always help orphans and vulnerable children, and programmes may need to advocate for a legal and policy framework that protects them. This should include laws and policies to:

- prohibit exploitative, harmful labour
- protect the inheritance rights of women and children
- protect children from sexual, physical and emotional abuse
- prohibit discrimination in healthcare and educational settings
- regulate and support foster placements and children in institutional care to ensure that they are not abused in any way.

Programmes also need to ensure that governments fulfil their obligations and intervene to protect neglected and abused children.

3

## PAY PARTICULAR ATTENTION TO WOMEN AND GIRLS

Programmes need to consider ways to reduce the specific vulnerability of girls and young women, including laws to protect their rights and policies and strategies to ensure that they have access to education and other services. In this way, women can be empowered to increase their assets, including their self-esteem, bargaining power and control over decisions, and extend their knowledge and skills, social networks, relationships of trust and access to the wider institutions of society.

4

## ENCOURAGE LINKS BETWEEN HIV/AIDS PREVENTION AND CARE ACTIVITIES, AND SUPPORT FOR ORPHANS AND VULNERABLE CHILDREN

Many communities and organisations are already carrying out HIV-related prevention and care activities, and such programmes can be a good way to identify and reach children and households in need of support. For example, efforts to provide support for orphans and vulnerable children could be integrated into home-based care activities.



# Strategies

The Child in Need Network in Zambia, which includes more than 70 NGOs and CBOs and two government departments, gathers and shares information about approaches to working with children in need and organises exchange visits to share best practice. It provides training and educational materials to build skills (for example, in psychosocial counselling and mobilising communities); raises awareness of children's needs and rights; and advocates with government and other stakeholders for policy change. The network has helped to improve referral and reduce duplication of activities.

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The Strengthening Community Partnerships for the Empowerment of Orphans and Vulnerable Children (SCOPE) project strengthens community efforts in Zambia through multi-sectoral district orphan and vulnerable children committees. It is helping stakeholders to form orphan and vulnerable children committees at both district and community levels, and works to build the capacities of these groups to respond to their priority concerns about orphans and other vulnerable children. One example of a partnership activity is the community schools in Lusaka. These are run by a group of churches in collaboration with the Zambia Community Schools Secretariat and Zambia Open Community Schools, which support the training of community schoolteachers and provide basic school materials.

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5

## DEVELOP A MULTI-SECTORAL RESPONSE INVOLVING PARTNERSHIPS AT ALL LEVELS

Programmes need to take an holistic approach that meets the health, nutritional, psychosocial, educational and economic needs of children and the families who care for them. Most organisations provide a limited range of services within a specific field, and few can meet all of these needs. Strategic alliances or partnerships are required to provide comprehensive support and complementary services for larger numbers of households and children in need of support.

Programmes should involve several sectors and promote collaboration, networking and referrals between government service providers, NGOs, community-based organisations (CBOs) and communities. Particular attention should be given to strengthening the role of schools. Effective partnerships that avoid duplication of effort require flexibility, good co-ordination and democratic decision-making processes.

Programming for orphans and vulnerable children should also, where possible, be integrated into existing services; for example, social welfare, agricultural extension and community health services.

The Children in Distress Network (CINDI), in South Africa, has 19 government and non-government partners, and each partner plays a specific role. For example, one identifies, recruits and trains foster parents and runs an adoption unit; another establishes community childcare committees; another runs a rapid intervention programme to identify homeless children newly arrived on the streets; while another promotes community-based care on farms. Other partners provide business and entrepreneurial skills training to child caregivers, and food and clothing, home schooling, short-term emergency care for children awaiting placement, counselling and capacity-building for caregivers.

*Smart, R. (2001)*

Programmes also need to encourage governments to involve all sectors (education, social welfare, agriculture, business, NGO, religious, community) and to provide effective co-ordination of action to meet the needs of orphans and vulnerable children.

6

## MONITOR THE IMPACT OF HIV/AIDS ON CHILDREN AND FAMILIES

The impact of HIV/AIDS on society is always changing. Monitoring its effects is important for policy and programme development. It is also important that programmes monitor and evaluate the impact of their interventions in order to identify the most effective approaches, assess the costs of activities to maximise efficiency, and assess the

# Strategies



*Monitor the impact of HIV/AIDS on children*

Religious organisations may be one of the few sources of support for vulnerable children and poor families. Religious leaders can help to mobilise communities, and volunteers are often motivated by their religious beliefs. In Zimbabwe, 30 separate orphan support programmes, involving almost 500 volunteers belonging to 103 local churches, help over 12,000 orphans, vulnerable children and needy families. The umbrella organisation Zimbabwe Orphans through Extended Hands (ZOE) was established to provide finance and training to these community initiatives and to help them expand their remit to include income generation and psychosocial support as well as material and spiritual support, reflecting a shift from relief to empowerment and self-reliance.

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quality of care and support provided to children and affected households and communities. Qualitative as well as quantitative aspects should be considered in evaluating such programmes.

More research is needed to inform programming to meet the needs of children. For example, more information is needed about:

- the migration of orphans and vulnerable children and what can lead to abandonment
- the impact of different types of support on orphans and vulnerable children and strategies to avoid dependency and unintended consequences
- the most appropriate ways of providing care and psychosocial support.

## 7

### REDUCE VULNERABILITY TO HIV INFECTION

- Provide youth-friendly, sexually-transmitted infection and family planning services. These should have trained and aware health and outreach workers, and flexible opening times or special sessions for children and adolescents. Recruit and train young people to act as intermediaries between clients and health workers.
- Promote links between schools and clinics providing health services to children and younger adolescents.
- Identify innovative approaches to ensure confidential and reliable access to condoms.
- Identify and train peer educators and counsellors.
- Develop ways of improving knowledge and awareness, building self-esteem and confidence, and developing communication, negotiation and decision-making skills (life skills, Education for Life).
- Support school-based HIV prevention, including training teachers and peer educators to provide sexual health and life-skills education, and integrate HIV prevention education into the school curriculum. Select teachers carefully; some male teachers are responsible for sexual harassment and abuse of schoolgirls.
- Address fear and negative attitudes among service providers.
- Strengthen and encourage voluntary counselling and testing.

# Strategies

## HIV/AIDS-RELATED LIFE SKILLS (BASED ON SELF-ESTEEM AND ASSERTIVENESS)

These include how to:

- make decisions about relationships and sex, and stand up for these decisions
- deal with emotions and communication with others
- deal with peer pressures to have unwanted sex, or unhealthy use of alcohol or drugs
- negotiate protected sex
- ask for help and support – and know where to ask for it.

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## EDUCATION PROGRAMMES FOR HIV PREVENTION

Effective programmes will:

- provide frank information
- encourage learning life skills
- emphasise the positive aspects of sex and minimise fear
- explain why it is important to delay first experience of intercourse and to have protected intercourse
- discuss clearly the consequences of unprotected sex and how to avoid this
- help young people to relate risky behaviour to their own lives by using active learning methods such as role-play and small group discussions
- reinforce group values against unsafe behaviour at school and in the community
- provide access to services and condoms.

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- Increase awareness of the sexual abuse of children. Work with policymakers, school authorities, community leaders, religious leaders and parents to protect children from sexual exploitation and abuse, and introduce measures to tackle sexual abuse by teachers. Ensure that cases are reported to the police and followed up.
- Promote collaboration between organisations working with orphans and vulnerable children and those working to address sexual abuse and exploitation.
- Provide specific support for girls who are victims of sexual abuse; for example, establish victim-friendly courts for girls. Provide counselling and support for girls who have been abused.
- Mobilise communities to challenge gender stereotypes and practices that deny girls their basic rights or put boys at risk; a macho image, for example. Create an environment where abuse is not tolerated.
- Challenge social norms and myths that increase the risk of HIV infection in children, using methods such as drama, role-play and songs.
- Establish community child protection committees.

# Strategies

NAGURU Teenage Centre offers health and reproductive services, including counselling, awareness raising and sexually transmitted infection treatment.

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In Uganda, the Straight Talk Foundation – an adolescent-friendly organisation that raises awareness of adolescent reproductive issues and children's rights – equips adolescents with life skills through school visit programmes and newspaper production.

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In Ghana, Catholic Action for Street Children has set up refuges where street children can go to relax, wash, themselves and their clothes, play games and keep their money and belongings. In conjunction with Street Girls Aid they also run crèches for the babies of street girls.

*Catholic Action for Street Children and UNICEF (1999)*

8

## MEET EDUCATIONAL, PSYCHOLOGICAL AND EMOTIONAL, AND ECONOMIC NEEDS

- Encourage schools and communities to work together to identify children who are not at school and enable them to attend.
- Establish alternatives to formal schooling, with flexible hours to suit working and street children.
- Explore catch-up mechanisms for children who have missed schooling or have only been able to attend irregularly.
- Encourage employers of children to allow them time to attend school or study, and advocate with policymakers to ensure that working children's rights to education are promoted and enforced.
- Change laws and practices that exclude girls who become pregnant from school.
- Provide safe locations for socially excluded children, including street children, to spend time and play.
- Identify vocational training that is appropriate to the circumstances of socially excluded children.
- Liaise with local businesses and artisans to set up apprenticeship schemes.
- Establish savings and loan schemes to enable socially excluded children to launch their own business enterprises.

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# Notes



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